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## BIB DATA SHEET

CONFIRMATION NO. 9465

<b>SERIAL NUMBER</b> 10/688,224	<b>FILING or 371(c) DATE</b> 10/15/2003 <b>RULE</b>	<b>CLASS</b> 607	<b>GROUP ART UNIT</b> 3763	<b>ATTORNEY DOCKET NO.</b> 02-161US01		
<b>APPLICANTS</b> Sharon Mi Lyn Tan, Brighton, MA; <b>** CONTINUING DATA *****</b> <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 01/21/2004						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /LAURA A BOUCHELLE/ Acknowledged <u>Examiner's signature</u>	<input type="checkbox"/> Met after Allowance <u>Initials</u>	<b>STATE OR COUNTRY</b> MA	<b>SHEETS DRAWINGS</b> 3	<b>TOTAL CLAIMS</b> 28	<b>INDEPENDENT CLAIMS</b> 3	
<b>ADDRESS</b> MAYER & WILLIAMS PC 251 NORTH AVENUE WEST 2ND FLOOR WESTFIELD, NJ 07090 UNITED STATES						
<b>TITLE</b> Medical device having anti-microbial properties and a false lumen and method of making the same						
<b>FILING FEE RECEIVED</b> 1414	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		